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CONFIRMATION NO. 2443

<b>SERIAL NUMBER</b> 10/510,393	<b>FILING OR 371(c) DATE</b> 10/05/2004 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> X-15555
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/US03/08821 03/31/2003  
 which claims benefit of 60/371,271 04/09/2002  
 and claims benefit of 60/371,270 04/09/2002 \*  
 and claims benefit of 60/371,278 04/09/2002 \*  
 and claims benefit of 60/371,275 04/09/2002 \*  
 and claims benefit of 60/371,277 04/09/2002 \*  
 (\*)Data provided by applicant is not consistent with PTO records.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

UNITED KINGDOM 0208116.4 04/09/2002  
 UNITED KINGDOM 0208117.2 04/09/2002  
 UNITED KINGDOM 0208118.0 04/09/2002  
 UNITED KINGDOM 0208119.8 04/09/2002  
 UNITED KINGDOM 0208120.6 04/09/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

25885

## TITLE

Growth hormone secretagogues

<b>FILING FEE RECEIVED</b> 932	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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